



CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES

VOLUME 5: NURSING SERVICES	Effective Date: 04/2018
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5.20.2 NURSING SCOPE OF SERVICE PROCEDURE	Attachments: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

I. PROCEDURE OVERVIEW

This procedure outlines the California Correctional Health Care Services (CCHCS) scope of nursing services which are provided pursuant to the California Nurse Practice Act; California Code of Regulations (CCR), Title 22; Joint Commission standards; American Nurses Association standards; and other regulatory agencies and professional standards.

II. DEFINITIONS

Nursing Care: Nursing care is delivered to patients within the frame work of the Complete Care Model in the correctional setting and delegated by licensed Registered Nurses (RN) to patients at CCHCS. Nursing care is the result of the nursing process and is directed toward assisting the patient to maintain or regain a maximum level of health, accept reduced capabilities, or cope with terminal illness and death.

Nursing Practice: The practice of nursing is defined as treatment of human response to health problems, through utilization of the nursing process. The performance of these acts requires specialized knowledge, judgment and skills based upon principles of psychological, social, physical and biological sciences and utilization of the nursing process. Nursing is both an art and a science.

III. RESPONSIBILITIES

The Statewide Chief Nurse Executive (CNE) is responsible for statewide implementation, of this procedure, and the regional and institutional CNEs are responsible for the local implementation, monitoring, and evaluation of this procedure at their assigned institution(s).

IV. PROCEDURE

A. Scope of Nursing Services

1. The practice of nursing by the RN means assuming accountability and responsibility for delivering care as defined by the California Nurse Practice Act and by professional standards.
2. The practice of nursing by the Licensed Vocational Nurse (LVN) means the assumption of responsibilities, duties, and performance of care within the scope of the LVN license as defined in the Business and Professions Code and CCR, Title 16, within their educational background, delegated by and under the supervision of the RN. These nursing activities include, but are not limited to:
 - a. Performing basic assessment/data collection (e.g., obtaining patient histories).
 - b. Communicating findings to the RN or a higher licensure.
 - c. Following and contributing to the interdisciplinary plan of care.
 - d. Providing patient education.
 - e. Providing patient interventions (e.g., dressing changes, emergency response, medication management, phlebotomy, and skin tests).

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3. The practice of nursing by the Psychiatric Technician (PT) means the assumption of responsibilities, duties, and performance of care within the scope of the PT license as defined in the Business and Professions Code and CCR, Title 16, within their educational background, delegated by and under the supervision of the RN. These nursing activities include, but are not limited to:
 - a. Performing basic assessment/data collection (e.g., obtaining patient histories).
 - b. Communicating findings to the RN or a higher licensure.
 - c. Following and contributing to the interdisciplinary plan of care.
 - d. Providing patient education.
 - e. Providing patient interventions (e.g., group therapy, emergency response, medication management, and skin tests).
4. The practice of nursing by the Medical Technical Assistant (MTA) means the assumption, duties, and performance of care within the scope of their nursing license as defined in the Business and Professions Code and CCR, Title 16, within their educational background, delegated by and under the supervision of the RN. This civil service classification requires a nursing license such as an LVN or PT license. The scope of services provided by the MTA shall be consistent with the level of their licensure by the State of California.
5. The practice of nursing by the Certified Nursing Assistant (CNA) means the assumption of responsibilities, duties, and performance of care within the scope of the CNA certificate as defined by Health and Safety Code and as outlined by the California Department of Public Health, Professional Certification Branch; within their educational background; delegated by and under the supervision of a licensed nurse. These nursing activities include, but are not limited to:
 - a. Providing personal care and comfort measures.
 - b. Performing basic nursing care procedures including, but is not limited to, feeding, vital signs, measuring intake and output, assistance with activities of daily living, toileting assistance, bladder/bowel retraining, application of non-sterile dry dressing to intact skin, application of non-legend ointments, creams, lotions and solutions to intact skin.
 - c. Observing patient responses to treatment and or environment.
 - d. Reporting changes to a licensed nurse or higher licensure.
 - e. Communicating with the patient.
6. The services performed by a Medical Assistant (MA) are not nursing in function; however, the performance of their functions contributes to nursing services MAs are unlicensed individuals who perform non-invasive routine technical support services under the specific authorization (specific written order) and supervision of a licensed Physician and Surgeon, Podiatrist, Physician Assistant, Nurse Practitioner, or Nurse Midwife in a medical office or clinic setting without the need of receiving a certification as outlined under the Medical Practice Act in the Business and Professions Code. These activities include, but are not limited to:
 - a. Administering medication by intradermal, subcutaneous, or intramuscular injections.
 - b. Performing skin tests but not interpreting the results.
 - c. Applying and removing bandages and dressings.
 - d. Removing sutures.

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- e. Performing ear lavage.
- f. Preparing patients for examinations.
- g. Shaving and disinfecting treatment sites.
- h. Other technical supportive services upon the specific authorization (specific written order) and supervision of a licensed Physician and Surgeon, Podiatrist, Physician Assistant, Nurse Practitioner, or Nurse Midwife.

B. Structure Services

1. *Primary Care:* CCHCS Primary Nursing Care supports professional nursing practice via a therapeutic relationship established between the nurse and an individual patient within the framework of the Complete Care Model. The relationship is initiated by the nurse and is in effect for the duration of the patient's assignment to the nurse's patient panel or during an episode of care or service.
 - a. Primary Nursing Care provides:
 - 1) Continuity of care for the patient.
 - 2) Accountability of the nurse for that care.
 - 3) Patient-centered care that is comprehensive, individualized, coordinated, and contributive to the professional satisfaction of the nurse.
 - b. Primary Nursing Care includes, but is not limited to:
 - 1) Assessment.
 - 2) Analysis.
 - 3) Nursing diagnosis.
 - 4) Planning.
 - 5) Implementation of interventions, outcome identification, and evaluation of responses.
2. *Care Management and Care Coordination:* CCHCS Nursing Services supports care management and care coordination in collaboration with the patient and other members of the health care team by developing, implementing, and evaluating patient care services and care plans for patient panels to ensure patients receive necessary health care services in a safe, timely, and medically appropriate manner. These together facilitate the appropriate delivery of health care services and minimize care fragmentation by utilizing the nursing care process.
 - a. The functions of care management and care coordination include, but are not limited to:
 - 1) Developing and maintaining positive relationships with patients across all care settings.
 - 2) Providing comprehensive assessment and reassessment of what patients can or cannot provide for their own care.
 - 3) Conducting face-to-face visits with ongoing support.
 - 4) Training and education of patients.
 - 5) Medical and social service providers.
 - 6) Co-creating a plan of care with patients that includes goals and targeted dates for completion.
 - 7) Assisting patients with coordination of services across the continuum of care.
 - 8) Initiating, maintaining, and leading communication between all members of the health care team including the patient.

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- 9) Using data to support and evaluate cost-effective, patient-centered, high quality services across the continuum of care.

C. Services Provided

The following is an overview of services provided:

1. *Medication Management*: CCHCS nursing staff provides services including, but is not limited to:
 - a. Administering prescribed medications accurately and timely to patients in ambulatory and inpatient settings at standardized times.
 - b. Assessing patients.
 - c. Monitoring side effects.
 - d. Planning care.
 - e. Implementation of interventions.
 - f. Identify outcomes.
 - g. Evaluation of responses.
 - h. Patient education.
 - i. Communicating with the interdisciplinary care team regarding all aspects of medication continuity and the patient's response to medication.
2. *Urgent/Emergent Care*: CCHCS nursing staff provides services including, but is not limited to:
 - a. Assessment.
 - b. Analysis.
 - c. Nursing diagnosis.
 - d. Planning.
 - e. Implementation of interventions.
 - f. Patient education.
 - g. Outcome identification.
 - h. Evaluation of responses.
 - i. Triage and prioritization when there is a sudden marked change in the patient's condition that requires immediate action for the preservation of life or the prevention of serious bodily harm to the patient or others.
 - j. Pre-hospitalization.
 - k. Non-emergent and emergent care.
3. *Continuity of Care*: CCHCS nursing staff provides services to all patients returning from a higher level of care, transferring between points of service (inter/intra facility), or returning from medical appointments and perform nursing functions including, but is not limited to:
 - a. Assessment.
 - b. Analysis.
 - c. Nursing diagnosis.
 - d. Planning.
 - e. Implementation of interventions.
 - f. Patient education.
 - g. Outcome identification.
 - h. Evaluation of responses to ensure the provision of care coordination and that the patient is placed at the appropriate level of care.

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4. *Ambulatory/Outpatient Care:* CCHCS nursing staff provides services including, but is not limited to:
 - a. Assessment.
 - b. Analysis.
 - c. Nursing diagnosis.
 - d. Planning.
 - e. Implementation of interventions.
 - f. Outcome identification.
 - g. Evaluation of responses.
 - h. Rounds.
 - i. Care management.
 - j. Care coordination.
 - k. Patient education.
 - l. Nursing assistance with the activities of daily living in an outpatient setting.
5. *Specialty:* CCHCS nursing staff provide services to patients returning from specialty appointments and patients requiring the services of a telehealth provider including, but is not limited to:
 - a. Assessment.
 - b. Planning.
 - c. Implementation of interventions.
 - d. Outcome identification.
 - e. Evaluation of responses.
 - f. Review of documentation.
 - g. Coordination of care.
 - h. Patient education.
 - i. Monitoring of side effects, problems, and issues.
6. *Inpatient Care:* CCHCS nursing staff provides services including, but is not limited to:
 - a. Assessment.
 - b. Analysis.
 - c. Nursing diagnosis.
 - d. Planning.
 - e. Implementation of interventions.
 - f. Outcome identification.
 - g. Patient education.
 - h. Evaluation of responses to patients in a licensed inpatient setting who have a severe illness or condition with potential significant risk factors and limited or no opportunity for improvement, or patients that need stabilization who do not require admission to a general acute care hospital.
7. *Mental Health Nursing Care:* CCHCS nursing staff provides services including, but is not limited to:
 - a. Assessment.
 - b. Analysis.
 - c. Nursing diagnosis.
 - d. Planning.
 - e. Implementation of interventions.
 - f. Outcome identification.

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- g. Patient education.
 - h. Evaluation of responses to patients undergoing mental health emergencies/crises or who require ongoing therapeutic action. Services are provided through the continuum of care from outpatient settings (General Population, Correctional Clinical Case Management System, Enhanced Outpatient Program) to inpatient settings (Mental Health Crisis Bed, Intermediate Care Facility, Acute Care Unit, Psychiatric Inpatient)) as indicated by the patient's care needs.
8. *Monitoring*: Nursing services shall be monitored at each level of the organization. The expectation is that each nurse provides services to the fullest extent possible within their licensed scope of practice in a professional, competent, and culturally sensitive manner. Monitoring activities shall be consistent with existing policies and procedures governing nursing practice including, but is not limited to:
- a. Inmate Medical Services Policy and Procedure, Volume 5, Chapter 4, Nursing Competency Program Policy and Procedure.
 - b. Inmate Medical Services Policy and Procedure, Volume 5, Chapter 17, Nursing Professional Practice Council Policy and Procedure.
9. *Palliative/End of Life Care*: CCHCS nursing staff provide services including, but is not limited to:
- a. Assessment.
 - b. Analysis.
 - c. Nursing diagnosis.
 - d. Planning,
 - e. Implementation of interventions.
 - f. Outcome identification.
 - g. Patient education.
 - h. Care coordination.
 - i. Evaluation of responses to terminally ill patients housed in California Department Code of Regulations institutions.

VI. REFERENCES

- California Business and Professions Code, Division 2, Chapter 5.4, Section 2544
- California Business and Professions Code, Division 2, Chapter 5, Article 3, Sections 2069-2071
- California Business and Professions Code, Division 2, Chapter 6, Sections 2700-2837
- California Health and Safety Code, Division 2, Chapter 1, Article 1, Section 1204
- California Health and Safety Code, Division 2, Chapter 2, Article 9, Sections 1337-1338.5
- California Code of Regulations, Title 22, Division 3, Health Care Services
- California Code of Regulations, Title 16, Division 25, Chapters 1 and 2
- Joint Commission Standards MM.04.01.01
- California Board of Registered Nursing Position Paper # NPR-B-12 11/93; Rev 02/00, "RN Supervision of Medical Assistant"
- American Nurses Association, Correctional Nursing: Scope and Standards of Practice, 2nd Ed; Silver Spring, MD., 2013

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- California Correctional Health Care Services, Inmate Medical Services Policy and Procedures, Volume 5, Chapter 4, Nursing Competency Program Policy and Procedure
- California Correctional Health Care Services, Inmate Medical Services Policy and Procedures, Volume 5, Chapter 17, Nursing Professional Practice Council Policy and Procedure